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CONFIRMATION NO. 3529

<b>SERIAL NUMBER</b> 10/531,559	<b>FILING OR 371(c) DATE</b> 12/05/2005 <b>RULE</b>	<b>CLASS</b> 073	<b>GROUP ART UNIT</b> 2855	<b>ATTORNEY DOCKET NO.</b> MSA260PR
<b>APPLICANTS</b> Norbert Kraemer, Darmstadt, GERMANY, Deceased; Thilo Kraemer, Darmstadt, GERMANY, Legal Representative;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/DE01/01903 05/20/2001				
<b>** FOREIGN APPLICATIONS *****</b> GERMANY 100 24 970.1 05/22/2000				
** SMALL ENTITY **				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 12
				<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> Horst M Kasper 13 Forest Drive Warren, NJ07059				
<b>TITLE</b> Method and device for the alignment and location of a sample such as tablets, pills or tablets				
<b>FILING FEE RECEIVED</b> 645	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	